

**TRANSMITTAL OF UTILITY
APPLICATION UNDER 37 C.F.R. §1.53**

Attorney Docket No. 21860-6147B

First named inventor Kimmo Kalervo Karhu

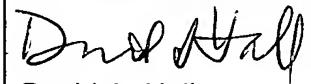
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Date of mailing November 10, 2003

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\$10.00

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Application Elements		Accompanying Application Papers
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input checked="" type="checkbox"/> Specification containing 19 pages (including Claims and Abstract). <ul style="list-style-type: none"> a. Title: DUAL-MODE RESONATOR b. Number of claims: 7 3. <input checked="" type="checkbox"/> 5 sheets of drawings 4. <input checked="" type="checkbox"/> Copy of Power of Attorney by Assignee and Certificate Under 37 C.F.R. § 3.73(b) from parent application. 5. <input type="checkbox"/> Sequence Listing <ul style="list-style-type: none"> <input type="checkbox"/> Paper copy (identical to computer copy) <input type="checkbox"/> Computer readable copy <input type="checkbox"/> Verified statement 		6. <input checked="" type="checkbox"/> Copy of assignment documents from parent applications 7. <input checked="" type="checkbox"/> Preliminary Amendment 8. <input checked="" type="checkbox"/> Return Receipt Postcard 9. <input type="checkbox"/> Small Entity Statement 10. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent.
SIGNATURE OF ATTORNEY/AGENT		
HELLER EHRLMAN WHITE & McAULIFFE LLP  David A. Hall Registration Number: 32,233		

Divisional of U.S. application Serial No. 09/876,590 filed June 7, 2001, the subject matter of which is incorporated herein by reference.

CORRESPONDENCE ADDRESS

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1770 U.S.PTO
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FEE TRANSMITTAL ACCOMPANYING UTILITY APPLICATION UNDER 37 C.F.R. §1.53	Attorney Docket No.	21860-6147B
	First named inventor	Kimmo Kalervo Karhu
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FEE CALCULATION FOR CLAIMS AS AMENDED

a)	Basic Fee	\$770/385	\$770.00
b)	Independent Claims $\frac{1}{1} - \frac{3}{3} = \frac{0}{0} \times$	\$86/43	\$ 0.00
c)	Total Claims $\frac{7}{7} - \frac{20}{20} = \frac{0}{0} \times$	\$18/9	\$ 0.00
d)	Fee for Multiple Dependent Claims =	\$260.00	\$ 0.00
		TOTAL FILING FEE	\$770.00

Applicant is a small entity.

A check in the amount of \$770.00 to cover the fee for filing the application.

Charge \$.00 to Deposit Account No. 50-1213.

The Commissioner is hereby authorized to charge any fees that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1213. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1213 during the entire pendency of this application. This sheet is filed in duplicate.

CORRESPONDENCE ADDRESS					
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Submitted by:					
Typed or printed name	David A. Hall			Reg. Number	32,233
Signature		Date	11/10/03	Deposit Account	50-1213